40204128

FE5AN018

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

14 JUN 12 PM 1:49

	1 of All Addionized Committee				Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typin over the lines.	g, type	12FE4M5	
Friends of Jim Inhofe						
<u> </u>			_			1 1 1 1 1 1 1
	PO Box 13300					
ADDRESS (number and street)						
Check if different						
than previously reported. (ACC)	Oklahoma City		111		OK 7311	3
. , ,						_
E. FEC IDENTIFICATION N	UMBER ♥	CITY =			STATE	ZIP CODE
C C00207993		3. IS THIS	NEW	1	AMENDED	STATE ▼ DISTRIC
		REPORT	X; NEW	OR	(A)	ОК
	,·					5
. TYPE OF REPORT (Ch	oose One)	(b) 12-Day Pf	RE-Election Repo	ort for the:		
(a) Quarterly Reports:		×	¢		on vog	
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)			Primary (12P)	ا إلى	General (12G)	Runoff (12R)
			Convention (1	12C)	Special (12S)	
July 15 Quarterly P	report (Q2)		M M	D D)	to the
October 15 Quarterly Report (Q3)		Election o	06	24	2014	in the State of OK
January 31 Year-End Report (YE)		(c) 30-Day POST-Election Report for the:				
		•	General (30G)	4		0
			Gerierai (30G	,	☑ Runoff (30R)	Special (30S)
Termination Report (TER)		Clastian a	M	,	Y ::	in the
		Election of	·Π	· · · · · · · · · · · · · · · · · · ·		State of
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. Covering Period 04	01	2014	through	06	04	2014
certify that I have examined th	\sim		knowledge and b	elief it is tr	rue, correct and con	nplete.
ype or Print Name of Treasurer	Timothy A. Kocl	h) 4				· · · · · · · · · · · · · · · · · · ·
		h-1			06	12 Y Y Y 2014
ignature of Treasurer Time	othy A. Koch	10-		E	Date Libert	2014
OTE: Submission of false, errone	eous, or incomplete	information ma	y subject the pers	on signing '	this Report to the pe	nalties of 2 U.S.C. §437a
Office						
Use						EC FORM 3 (Revised 02/2003)